

FILED
IN CLERKS OFFICE

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

2021 NOV -1 PM 1:30

U.S. DISTRICT COURT
DISTRICT OF MASS.

Mark Saunders,

Plaintiff,

v.

Civil Action No. 1:21-cv-11240-DJC

Rosilind Picard, Ann MacKay,

Kristen Luken, Roger Mark,

Thomas DuVol, Harold Jones,

Garrett Smith, Daniel Romaine,

Anders Brownworth, Carmen Aldinger,

Doris Kellom, Beatrice Yankey and the

Newton Covenant Church

Defendants.

USMS
SCREENED

**PLAINTIFF'S RENEWED MOTION FOR LEAVE TO PROCEED IN FORMA
PAUPERIS**

I, Mark Saunders, Plaintiff, Pro Se in the above entitled case move this Court for leave to proceed in Forma Pauperis in the captioned cause. In support of this motion, I state that I am unable to pay the costs of this action. I have attached the Application to Proceed without Prepaying Fees or Costs and supplemental documentation, as ordered by the Court.

Respectfully submitted,

DATE: 10/31/21



Mark Saunders
28 Cushman Street
Watertown, Massachusetts 02472-3704
617-905-7454

AO 240 (Rev. 06/09) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

UNITED STATES DISTRICT COURT

for the

District of Massachusetts

Mark Saunders

Plaintiff

v.

Rosaling Picard et al

Defendant

Civil Action No. 1:21-cv-11240-DJC

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: N/A.

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

N/A 2. *If not incarcerated.* If I am employed, my employer's name and address are:

My gross pay or wages are: \$ 0.00, and my take-home pay or wages are: \$ _____ per
(specify pay period) _____.

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

(a) Business, profession, or other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(b) Rent payments, interest, or dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(c) Pension, annuity, or life insurance payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(d) Disability, or worker's compensation payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(e) Gifts, or inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(f) Any other sources	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.
I currently receive rental payments totaling \$1450/mo which is passed on to the landlord. I am solely responsible for the rent of \$1700/mo. This is not income from rental property, and occupancy of other parties is inconsistent.

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4. Amount of money that I have in cash or in a checking or savings account: \$ 1774.86

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name *(describe the property and its approximate value)*:

2003 Honda Civic
Fidelity Inherited IRA - \$5770.75

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses *(describe and provide the amount of the monthly expense)*:

Rent - \$1700/mo
Eversource Electric - \$185
National Grid Gas - \$134.94
Amica Insurance - \$107.70

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

N/A

8. Any debts or financial obligations *(describe the amounts owed and to whom they are payable)*:
Chase Visa: \$15,932.11
Chase Visa/Southwest: \$4298.98
BJ's Mastercard: \$8697.56

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: Oct 31, 2021

Mark P Saunders
Applicant's signature

Mark P Saunders
Printed name